PTO/SB/21 (04-04)

10/807,533

March 23, 2004

TRANSMITTAL

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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Application Number

Filing Date

| | | I ' | iiiig Date | 1110101120 | , | | |
|---|---------------------|--|--|---|--|--|--|
| FORM | | | irst Named Inventor | Christoph | er Dilluvio | | |
| (to be used for all correspondence after initial filing) | | al filing) | art Unit | 3612 | | | |
| | | | xaminer Name | Jason S. | Morrow | | |
| Total Number of Pages i | n This Submission | A | ttorney Docket Number | 5362-000 | 485 | | |
| | | ENCLOSU | RES (check all that apply) | | | | |
| Fee Transmittal Form | | ☐ Drawing(s) | | After Allowance Communication to Technology Center (TC) | | | |
| Fee Attached | | Licensing-related Papers | | | Appeal Communication to Board of Appeals and Interferences | | |
| Amendment / Reply | | Petition | | | Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) | | |
| After Final | | Petition to Convert to a Provisional Application | | ☐ Proprie | Proprietary Information | | |
| Affidavits/declar | ration(s) | Power of Attorney, Revocation Change of Correspondence Address | | ☐ Status | Status Letter | | |
| Extension of Time Request | | Terminal Disclaimer | | Other Enclosure(s) (please identify below): | | | |
| Express Abandonment Request | | Request for Refund | | acl | knowledgement postcard | | |
| <u> </u> | | CD, Number of CD(s) | | | | | |
| ☐ Information Disclosure Statement | | | | 1 | | | |
| Certified Copy of Priority Document(s) | | Remarks | J | | | | |
| Response to Missin Incomplete Applicat | | | | | | | |
| Response to Mi Parts under 37 1.52 or 1.53 | | | | | | | |
| | SIGNA | TURE OF API | PLICANT, ATTORNEY, | OR AGENT | | | |
| Firm or Individual name | Harness, Dickey & | Pierce, P.L.C. | Attorney Name Jeffrey H. Urian | | eg. No. 5,232 | | |
| Signature | | M)_ | <u> </u> | | | | |
| Date | June 1, 2006 | / / / / / | | | | | |
| | C | ERTIFICATE | OF TRANSMISSION/MA | ILING | | | |
| I hereby certify that this Service with sufficient Alexandria, VA 22313-1 | postage as first of | class mail in ar | ile transmitted to the USPTO n envelope addressed to: | O or deposited Commissioner | with the United States Postal for Patents, P.O. Box 1450, | | |
| Typed or printed name Jeffrey H. Urian | | 711 7 | | Express Mail Label No. | EV 853 856 499 US (6/1/2006) | | |
| Signature | | /H/ | | Date | June 1, 2006 | | |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, process) an application. Confidentially is governed by 39 0.3.0. 122 and 37 CFA 1.14. This collection is sufficient to Complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO:

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Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

| FEE TRANSMITTAL | | Complete if Known | | | | |
|-----------------------------------|------------------------|----------------------|----------------------|--|--|--|
| FEE TO AND | | Application Number | 10/807,533 | | | |
| FEE IRANS | SWITTAL | Filing Date | March 23, 2004 | | | |
| for FY | 2006 | First Named Inventor | Christopher Dilluvio | | | |
| ☐ Applicant claims small entity s | tatus. See 37 CFR 1.27 | Examiner Name | Jason S. Morrow | | | |
| - | | Art Unit | 3612 | | | |
| TOTAL AMOUNT OF PAYMENT | (\$) 300 | Attorney Docket No. | 5362-000485 | | | |

| METHOD OF PAYMENT (check all that apply) | | | | | | | |
|---|--|--------------------|--------------------|---------------------------|--|---------------------------------------|------------------|
| ☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) : | | | | | | | |
| Deposit Account Deposit Account Number: 50-0275 Deposit Account Name: ASC Incorporated | | | | | | | |
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| information and authorization | | | | - | | · · · · · · · · · · · · · · · · · · · | |
| FEE CALCULATION | | | | | | | |
| 1. BASIC FILING, SEA | RCH, AND FILING F | | | DOU EEEC | EVARAIN | ATION FEEC | |
| | | EES Small Entit | _ | Small Entity | 1 FEES EXAMINATION FEES Small Entity Small Entity | | |
| Application Type | Fee (\$) | Fee(\$) | <u>Fee(</u> : | | Fee(\$) | Fee(\$) | Fees Paid (\$) |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |
| 2. EXCESS CLAIM FE | ES | | | | | | Small Entity |
| Fee Description | 1 11 15 1 | | | | | <u>Fee (\$)</u> | <u>Fee (\$)</u> |
| Each claim over 20 (inc Each independent claim | | | 1es) | | | 50 200 | 25 100 |
| Multiple dependent clair | | duing Moiss | ac 3) | | | 360 | 180 |
| Total Claims | Extra Cl | <u>aims</u> | Fee(\$) | Fee Paid (\$) | | <u>Multiple l</u> | Dependent Claims |
| <u>48</u> -46 or HP= | = <u>2</u> | X | <u>50</u> = | <u>100</u> | | <u>Fee (\$)</u> | Fee Paid (\$) |
| HP = highest number of t | | | | | | | |
| Indep. Claims | Extra CI | | Fee(\$) | Fee Paid (\$) | | | |
| 8 - 7 or HP= | | X | <u>200</u> = | <u>200</u> | | | |
| HP = highest number of i | | aims paid for, | it greater than 3. | | | | |
| 3. APPLICATION SIZE If the specification and di | | ed 100 shee | ts of paper (exc | uding electronically | v filed sequence | or computer | |
| listings under 37 | CFR 1.52(e) |), the applic | ation size fee di | ie is \$250 (\$125 for | | | 50 |
| sheets or fraction | | | | | | | = 5 (4) |
| <u>Total Sheets</u> | Extra She | | | additional 50 or | | of Fee (\$) | Fee Paid (\$) |
| | = <u>0</u> | / 50 = | <u>0</u> (round | d up to a whole nu | umber) x | | = 0 . |
| 4. OTHER FEE(S) | | | | | | | Fees Paid (\$) |
| Non-English Spe | | | mail entity disc | ount) | | | |
| Other (e.g., late f | ining surchar | ge): | | - | | | |
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| SUBMITTED BY | -0-1 | | | |
|-------------------|------------------|--|-----------|----------------|
| Signature | Alli | Registration No. (Attorney/Agent) 46,232 | Telephone | (248) 641-1600 |
| Name (Print/Type) | Jeffrey H. Urian | | Date | June 1, 2006 |

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06-02-06



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.:

10/807,533

Filing Date:

March 23, 2004

Applicant:

Christopher Dilluvio

Group Art Unit:

3612

Examiner:

Jason S. Morrow

Title:

RETRACTABLE ROOF STRUCTURAL SYSTEM

Attorney Docket:

5362-000485

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

AMENDMENT

Sir:

In response to the Office Action mailed March 1, 2006, please amend the application as follows and consider the remarks set forth below.

Amendments to the Claims begin on page 2 of this paper.

Remarks begin on page 20 of this paper.

06/05/2006 CCHAU1

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